

State of North Carolina Department of Justice



North Carolina Justice Academy

2078 Laws Governing Concealed Carry Handgun Application

| Full Name | : | | | | | | | | |
|---|---------|------|---|---------------|----------|--------|--------|---------------|-----------------|
| Last | | | Last | First | | | Middle | | |
| SSN (last 4) | | | | Date of Birth | | | | | |
| Address: | | | | | | | | | |
| Street A | | | | | Address | | | | Apt/Unit # |
| | | | | | | | | | |
| City | | | | | County | | | State | ZIP Code |
| Phone with area code: | | | | | Email | | | | |
| Course #2078 Laws Governing Concealed Carry Handguns Date you wish to attend: | | | | | | | | | |
| 1 st Choice | | | | | | | | | |
| 2 nd Choice | | | | | | | | | |
| Registered students will receive a student letter via e-mail around 30 days before class with information, reference payment, and assigned room. Bring eye and ear protection. NO Firearms. | | | | | | | | | |
| payment | with | a C | nave been notified fr Certified Check/Mone \$75.00 class fee with | ey Order | /Cash. P | ersona | l Chec | ks will not b | |
| FAX completed application to: Registrar 910-525-5235 or Mail to: NCJA Registrar PO Box 99 Salemburg, NC 28385 | | | | | | | | | |
| and perso | onal it | ems | eral student informatio s you need to bring; plo pj.gov/NCJAGeneral.a | ease acc | | | | | prices, parking |
| If you hav | e any | / qu | estions, please contac | t Carolyr | Pope at | 910-52 | 5-4158 | ext 253. | |
| Comment | ts: | | | | | | | | |
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